National CPR/AED Awareness Week June 1—8, 2008:

UA Sarver Heart Center Offers Free Class in Compression-Only CPR

From: Daniel Stolte, (520) 626-4083 June 2, 2008

The University of Arizona Sarver Heart Center is offering a free training class for the public in Chest-Compression-Only CPR and the use of Automated External Defibrillators (AEDs) during National CPR/AED Awareness Week on Wednesday, June 4, from 5:30 p.m. until 7 p.m. at DuVal Auditorium at University Medical Center (UMC). No registration is necessary. For more information, please call the Sarver Heart Center at (520) 626-1232.

Encouraging bystanders to perform CPR is especially critical in Arizona, where bystander CPR rates are much lower than in most other states: Only one in five Arizonans is willing to initiate CPR on a cardiac arrest victim.

"When someone's heart stops, every second counts," says **Gordon A. Ewy, MD, director of the UA Sarver Heart Center**, whose Resuscitation Research Group developed Chest-Compression-Only CPR. "Bystanders performing CPR can make the difference between life and death. Call 911 and do chest-compression-only CPR. You don't have to be certified but attending a training class in this technique will give you the confidence of knowing you are doing your best."

Continuous chest compressions are helpful in bridging the gap between the collapse and the time professional help arrives. When someone is in cardiac arrest and receives no help through chest compressions or an AED, the chances of survival drop 10 percent each minute.

In December 2007, Congress passed a bill designating the first week of June "National Cardiopulmonary Resuscitation (CPR) and Automated External Defibrillator (AED) Awareness Week". In reaction to the staggering 95 percent mortality rate for the over 300,000 Americans who are victims of sudden cardiac arrest each year, House members Reps. John R. "Randy" Kuhl, Jr. (R-NY), and Dan Boren (D-OK) co-sponsored the bill (H.Con.Res. 215). The passing of this resolution shines a national spotlight on how important it is for all Americans to learn critical lifesaving skills such as how to perform CPR, how to use an AED and the need to increase public access to AEDs.

Recently endorsed by the American Heart Association, Chest-Compression-Only CPR has been shown to improve the chance of survival after sudden cardiac arrest. It is easy to remember, easy to do and involves no mouth-to-mouth breathing. In addition, individuals are encouraged to use External Automated Defibrillators if available. Contrary to common concern, no special training is required to safely use these fully automated devices.

Compression-Only CPR consists of the following simple steps:

1. Direct someone to call 911 or make the call yourself.

2. Position the patient with their back on the floor. Place the heel of one hand on the center of the chest (between the nipples) and the heel of the other hand on top of the first. Lock your elbows, place your shoulders vertically above your hands and "fall" forward, depressing the chest 1-1 ½ inches deep. Instead of trying to "push" by bending and extending your arms, use the weight of your upper body to press down on the chest. Lift your hands slightly each time to allow the chest to recoil. Perform chest compressions at a rate of about one hundred per minute (slightly faster than one compression per second). When you tire, take turns with others until paramedics arrive.

3. If an automated external defibrillator (AED) is available, turn it on and follow the AED's voice instructions. If no AED is available, continue chest compressions with as few interruptions as possible.

Important: Struggling to breathe, "gasping" or "snoring" is not a sign of recovery. It means the brain is receiving enough blood flow to trigger the gasping reflex, but not enough for the patient to survive. Continuous chest compressions will enhance blood flow to the brain and help maintain gasping, making mouth-to-mouth breathing unnecessary. For cases of near drowning, drug overdose or unresponsiveness of young children (age 8 or under), follow conventional CPR (2 mouth-to-mouth ventilations followed by 30 chest compressions). However, even in those cases, chest-compression-only CPR is better than doing nothing. A formal training class in conventional CPR is recommended to learn conventional CPR.

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